



July 22, 2003

Mayor Seng and City Council  
City of Lincoln  
City County Building  
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Salem FB LLC, d.b.a. Fast Break #2, 2200 North 48<sup>th</sup> Street requesting a class B liquor license.

This location was previously known as Holiday Station which held a class B liquor license.

Fast Break has requested that Peggy Roeder be approved as the manager of the liquor license.

Background information on Ms. Roeder will be omitted as she has been approved by the Council as a manager at Fast Break located at 5700 North 33<sup>rd</sup> Street.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

A handwritten signature in black ink, appearing to read "Tom Casady".

THOMAS K. CASADY, Chief of Police



Police Department  
575 South 10th Street / Lincoln, Nebraska 68508 / Phone: 402-441-7204 / Fax: 402-441-8492 / Web: [www.ci.lincoln.ne.us](http://www.ci.lincoln.ne.us)  
A nationally accredited law enforcement agency



# STATE OF NEBRASKA

A3-081900  
39

Set date 7/28  
PH: 8-18-03



Mike Johanns  
Governor

FILED  
CITY CLERK'S OFFICE  
'03 JUL 21 PM 5 00  
CITY OF LINCOLN  
NEBRASKA

NEBRASKA LIQUOR CONTROL COMMISSION  
Forrest D. Chapman  
Executive Director  
301 Centennial Mall South, 5th Floor  
P.O. Box 95046  
Lincoln, Nebraska 68509-5046  
Phone (402) 471-2571  
Fax (402) 471-2814  
TRS USER 800 833-7352 (TTY)  
web address: <http://www.nol.org/home/NLCC/>

July 17, 2003

Office of the City Clerk  
555 So 10<sup>th</sup> St  
Suite 103  
Lincoln NE 68508

Salem FB, LLC  
dba Fast Break #2  
2200 North 48th  
CLASS B

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

*Mary Messman*

Mary Messman  
Licensing Division

Enclosures

Rhonda R. Flower  
Commissioner

Bob Logsdon  
Chairman

R.L. (Dick) Coyne  
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001  
REV. 12/99

**APPLICATION FOR LICENSE**

Nebraska Liquor Control Commission  
 PO Box 95046, 301 Centennial Mall South  
 Lincoln, NE 68509-5046

*City #160215 mm -*  
<http://www.nol.org/home/NLCC/>  
 Phone: (402) 471-2571  
 Fax: (402) 471-2814

**RECEIVED**

JUN 27 2003

NEBRASKA LIQUOR  
CONTROL COMMISSION

**INSTRUCTIONS:** Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders/member holding over 25% stock/interest. 6. All applications must be typewritten or printed clearly. 7. Submit in Triplicate

**CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH**

Class of License (Check applicable class)	Registration Fee	License Fees	Corporate Surety Bond
<input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input checked="" type="checkbox"/> B Beer, Off Sale Only - Indicate Inside or Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits	\$45.00	\$150.00	exempt
<input type="checkbox"/> DI Spirits, Wine, Beer, Off Sale only - within extraterritorial zoning jurisdiction	\$45.00	\$150.00	exempt
<input type="checkbox"/> C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, on Sale)	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> H Nonprofit Corporation	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> K Wine Only, Off Sale	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> O Boat	\$45.00	\$ 50.00	exempt
<input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	Varies \$100 to \$1,000	\$10,000 min.
<input type="checkbox"/> X Wholesale Liquor	\$45.00	\$500.00	\$ 5,000 min.
<input type="checkbox"/> W Wholesale Beer	\$45.00	\$250.00	\$ 5,000 min.
<input type="checkbox"/> Y Farm Winery	\$45.00	\$250.00	\$ 1,000 min.
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$45.00	\$250.00	\$ 1,000 min.

**TYPE OF APPLICATION****CORPORATE SURETY BOND INFORMATION**

Type of application being applied for  
(place appropriate number in box)

3

- 1= Individual License requires  
Form 1 to be attached.  
 2= Partnership License requires  
Form 2 to be attached.  
 3= Corporate License requires  
Form 3 and 4 and Manager  
Application be attached.

Bond Company - for Classes L V W X Y only

Start Date Month/Day/Year

Bond Number

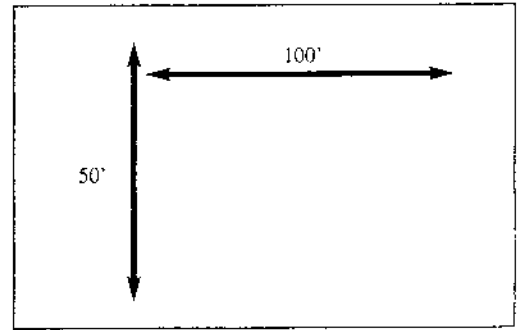
**SECTION A - LOCATION INFORMATION - Must be completed by all applicants**

Trade Name (name of business)			Telephone Number at premise to be licensed		
Fast Break #2			402-466-2881		
1) Street Address of Proposed licensed premise			2) Mailing Address for receipt of Liquor Control Commission mailings		
2200 North 48th Street			P.O. Box 81006		
Is this located inside the city limits Circle <u>YES</u> / NO					
City	County	Zip Code	City	County	Zip Code
Lincoln	Lancaster	68504	Lincoln	Lancaster	68501

## DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

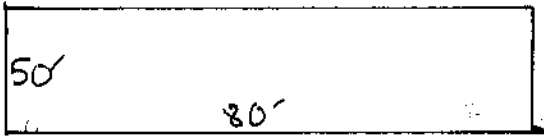
In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.

N ↑



Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement approximately 30' x 50' at the East end.

↑  
N



One Level

SECTION B	OTHER INFORMATION REQUIRED		
	Yes	No	Explanation/Comments
<p><b>1. READ CAREFULLY.</b> Answer completely and accurately.</p> <p>Has anyone who is a party to this application, or their spouse, <u>ever</u> been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor or violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.</p>	No		

	Yes	No	Explanation/Comment
2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).	X	No	See attached
3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.	X	No	Repl 27845
4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.	Yes		
5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.		No	
6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.		No	
7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?		No	
8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.		NO	
9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.		No	
10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.	Cornhusker Bank Charles R. Salem		
11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.	1648 South #43562 3100 NW 12th #54995 630 W Van Dorn #51960		
12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.	Peggy C. Roeder 30 Hrs.		
13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.	Previously been licensed as manager of convenience store.		
14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed).	See attached		
15. When do you intend to open for business?	6-26-03		

16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Charles R. Salem 2825 Stratford	1945	Present	Lincoln, NE
Sherene Lee Salem 2825 Stratford	1945	Present	Lincoln, NE
Carolyn S. Otte 3003 South 31st	1983	Present	Lincoln, NE
Robert C. Otte 3003 South 31st	1983	Present	Lincoln, NE

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25% of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

sign  
here  
sign  
here  
sign  
here  
sign  
here

*Charles R. Salem*

*x Sherene Lee Salem*

*x Carolyn S. Otte*

*x Robert C. Otte*

sign  
here  
sign  
here  
sign  
here  
sign  
here

RECEIVED

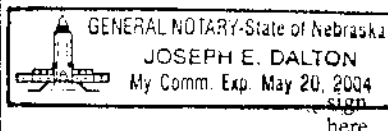
JUN 27 2003

NEBRASKA LIQUOR  
CONTROL COMMISSION

Subscribed in my presence and sworn to before me this 27 day of JUNE, 2003.

(SEAL)

In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.



*Joseph E. Dalton*

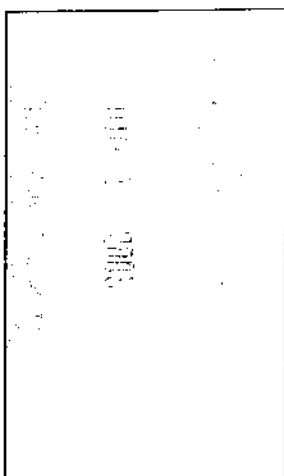
Notary Public Signature

# Corporation/LLC Application for License - Form 3

Nebraska Liquor Control Commission

## INSTRUCTIONS:

- 1) Application and application for manager must be typewritten and submitted in triplicate
- 2) Fingerprint cards (2 cards per person) must be submitted for: a) each stockholder owning over 25% of the stock, b) chief executive officer, c) proposed manager and d) all spouses
- 3) Information regarding spouses must be completed



Name of Corporation That Will Hold License. <b>Attach copy of Articles of Incorporation</b>		Total Number of Shares (if corporation)	
Salem FB, LLC			
Corporate Street Address (1)	Mailing address for receipt of Liquor Control Commission Mailings		Corporate Telephone Number
1234 North 14th Street	P.O. Box 81006		402-476-3333
City	County	State	Zip Code
Lincoln	Lancaster	NE	68501
Name of Registered Agent	Name of Proposed Manager		
Robert R. Otte	Peggy C. Roeder		
IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER			
Name	Title	Date of Birth	Social Security Number
Charles R. Salem	President		
Home Address (1)		State	
2825 Stratford Avenue		NE	
City	State	Zip Code	Home Telephone Number
Lincoln	NE	68502	402-435-0434

# Corporation/LLC Application for License - Form 3

PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES				
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number Tax ID #	Date of Birth Incorp	Title	Number of Shares/ %
NAME AIE, Inc.			Member	50%
Spouse Name				
NAME Salem Oil Company			Member	50%
Spouse Name				
NAME				
Spouse Name				
NAME				
Spouse Name				
NAME				
Spouse Name				
NAME				
Spouse Name				

(If Necessary, Continue on Separate Sheet)



# Corporation/LLC Application for License - Form 3

Nebraska Liquor Control Commission

Is this Corporation/LLC controlled by another Corporation? ☒ YES ☐ NO

Name of Control Corporation

AIE, Inc. - 50%  
Salem Oil Company - 50%

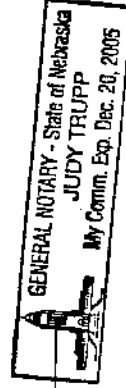
IF YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LLC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned. An organizational chart is attached.

Please indicate below your corporate tax year with the IRS

Starting Date: January Ending Date: December

STATE OF NEBRASKA )  
 )  
 )  
 ) ss. )  
LANCASTER County )

*Judy Trupp*  
Notary Public Signature & Seal



Salem FB, LLC by  
Salem Oil Company, Manager

By Andrew R. Salem, Pres

PRESIDENT/MEMBER

AIE, Inc., Member by

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format

SECRETARY/MEMBER

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JUN 27 2003

NEBRASKA LIQUOR  
CONTROL COMMISSION

JUN 27 2012

Exhibit "A"

JUN 27 2012

### **Salem FB, LLC – Organization chart**

Salem FB, LLC

- Salem Oil Company, A Nebraska Corporation  
Manager / Member - Owns 50% of Salem FB, LLC  
Charles R. Salem, Pres. 100% Owner
- AIE, Inc., A Nebraska Corporation  
Manager / Member - Owns 50% of Salem FB, LLC  
Robert R. Otte, Pres 50% owner  
Carolyn S. Otte, Sec/Trea 50% owner

**Application for Corporate Manager****\*Must Be A Nebraska Resident\*****Please submit in Triplicate****RECEIVED**Return to: **Nebraska Liquor Control Commission, PO Box 95046****301 Centennial Mall So., Lincoln NE 68509**Phone: (402) 471-2571 Fax: (402) 471-2814 Web address: <http://www.nol.org/home/NLCC/>

JUN 27 2003

**LIQUOR LICENSE INFORMATION**

NAME OF LICENSED CORPORATION

Salem FB, LLC

CLASS &amp; LICENSE NUMBER

B

TRADE NAME OF LICENSED PREMISE

Fast Break #2

STREET ADDRESS OF LICENSED PREMISE

2200 North 48th Street

CITY

Lincoln

COUNTY

Lancaster

ZIP CODE

68504

On behalf of the corporation, I designate this individual as corporate manager.

Signature of Corporate President/CEO:

**APPLICANT INFORMATION (MUST BE 21 OR OVER)**

NAME (LAST, FIRST, MIDDLE, MAIDEN)

Roeder, Peggy Charlene Wood

SEX

☒ F ☐ M

SOCIAL SECURITY NUMBER

DATE OF BIRTH

PLACE OF BIRTH

Hastings, NE

HOME STREET ADDRESS

8331 Carruage Gill Court

CITY

Lincoln

COUNTY

Lancaster

STATE

NE

ZIP CODE

68512

HOME TELEPHONE NUMBER

402)488-0343

BUSINESS TELEPHONE NUMBER

( )

DRIVERS LICENSE NUMBER &amp; STATE

NE

**SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)**

FULL NAME (LAST, FIRST, MIDDLE, MAIDEN)

None

SOCIAL SECURITY NUMBER

DRIVERS LICENSE NUMBER  
& STATE

DATE OF BIRTH:

PLACE OF BIRTH

**1. READ CAREFULLY.** Answer completely and accurately.

Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

☐ Yes ☒ No

**2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.**

☒ YES ☐ NO Ampride, Bennett, NE #B39806 January, 1998

3. Have you or your spouse ever made a compromise settlement for violation of such laws?

☐ YES ☒ NO

4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License?  
Nebraska Liquor Control Act (§53-131.01)

☒ YES ☐ NO

5. Have you filed fingerprint cards and **PROPER FEES** (if check, make out to the NE State Patrol), with this application?

☒ YES ☐ NO

**RESIDENCES FOR THE PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE**

APPLICANT: CITY & STATE	YEAR FROM TO	SPOUSE: CITY & STATE	YEAR FROM TO
Lincoln, NE	1989 Present	N/A	
Bennett, NE	1968 1989		

**EMPLOYERS - LIST LAST TWO EMPLOYERS**

YEAR FROM TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
12-98 4-01	Nebraska Retail Ventures	Judy Gross	402-782-8900
1987 12-98	Waverly Coop	Judy Gross	402-782-8900


**PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY APPLICANT & SPOUSE**

STATE OF NEBRASKA )  
 ) SS  
COUNTY OF LANCASTER

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has NO interest directly or indirectly, an affidavit of non participation may be attached.

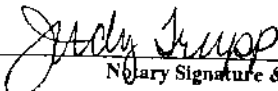
The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and inaccurate.

  
Signature of Applicant

\_\_\_\_\_  
Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this 6th  
day of June 2003

Subscribed in my presence and sworn to before me this \_\_\_\_\_  
day of \_\_\_\_\_

  
Notary Signature & Seal

\_\_\_\_\_  
Notary Signature & Seal

